

(c) the reaction of the Government thereto?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI ARJUN SINGH) : (a) to (c). The All India Kendriya Vidyalaya Teachers' Association has put forward a number of demands at different times including the demands as referred to in the press report under reference.

The representatives of the association met the Minister of Human Resource Development on 17.11.1991. The Govt. is always willing to discuss matters with Kendriya Vidyalaya Sangathan employees' Associations with a view to looking into their reasonable demands so that appropriate solutions could be arrived at.

Quality of C.G.H.S. Medicines

873. SHRI MADAN LAL KHURANA:
SHRI ANAND RATNA
MAURYA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Drug Controller had been asked to collect samples from the Government Medical Stores Depots of the medicines being supplied to the various C.G.H.S. Dispensaries/hospitals to check their purity;

(b) if so, the details of the testing of the medicines with the result during 1989-90, 1991-92;

(c) whether the C.G.H.S. dispensaries and hospitals are generally out of stock of medicines;

(d) if so, the steps taken to stock the dispensaries/hospitals with sufficient stock of medicines;

(e) whether the upkeep of the CGHS dispensaries/hospitals is not up to the standard; and

(f) if so, the steps taken or proposed to keep the hospitals and dispensaries neat and clean in all respects?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) and (b). The Drugs Controller (India) had asked his Zonal Officers at Madras, Calcutta, Ghaziabad and Bombay to draw samples from the Government Medical Store Depots/C.G.H.S. Dispensaries/Hospitals in February, 1991. However, samples were being drawn prior to this also.

Out of 114 samples tested so far, during 1989-90, 1990-91 and 1991-92, 97 samples have been found to be of standard quality and 17 samples have been found to be not of standard quality.

(c) to (f). Some steps have been taken to ensure the availability of medicines in the CGHS Dispensaries/Hospitals. These includes authorising private Chemists on a Zonal basis to supply medicines which are of stock to the dispensaries and streamlining the purchase procedures.

Adequate staff has been provided in all the Dispensaries for ensuring cleanliness.

CGHS Beneficiaries

874. SHRI MADAN LAL KHURANA:
Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) whether the CGHS beneficiaries are receiving proper, adequate and prompt medical attention and care at the hands of the specialist doctors visiting dispensaries and the hospitals;

(b) if not, the reasons therefor;

(c) whether doctors/compounders etc. attend their work on scheduled time;

(d) whether any surprise check is kept on the opening/closing timings of the dispensaries; and

(e) the steps proposed to be taken to provide CGHS polyclinic facilities to residents of R.K.Puram, Janakpuri and Rajouri Garden in Delhi?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) Yes, Sir.

(b) In view of 'A' above, question does not arise.

(c) Yes, Sir.

(d) Yes, Sir.

(e) A CGHS Polyclinic has already started functioning at Janakpuri. At Present there is no proposal to start a new Polyclinic at R.K. Puram or Rajouri Garden.

Family Planning Programme

875. SHRIGEORGE FERNANDES: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) whether the Government are evolving a more result oriented multi-pronged Family Planning Programme; and

(b) if so, the details thereof including the efforts being made to control population growth?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI

SIDDHARTHA): (a) and (b). Over the last few months, the Department of Family Welfare has carried out a detailed review of the population control efforts in the country, in consultation with the State Government UTs Administration with a view to devising innovative strategies and imparting a new thrust and dynamism to the Family Welfare Programme. As a result of these efforts, a Draft Action Plan has been evolved for revitalising the population control efforts in the country. The key features of the Draft Action Plan include, (1) evolving a national consensus in support of the Family Welfare Programme and to obtain willing participation of all sections of the society (2) improving the quality and outreach of family welfare services, (3) special focus on 90 poor performing districts (Birth rate of 39 per thousand population and above as per the 1981 census), (4) developing an innovative package of incentives/disincentives for promotion of the small family norm, (5) increasing the coverage of younger age couples through vigorous promotion of spacing methods, (6) introducing new contraceptives and improving the quality of contraceptives (7) strengthening family welfare schemes in urban areas especially in slum pockets, (8) revitalising training activities of medical/para-medical personnel with emphasis on motivational and counselling aspects, (9) sustaining the good work done under the Universal Immunization Programme and strengthening of other inter-cations for Maternal and Child Health Care, (10) reorientation of information, education and communication efforts to focus on the quality of life issues and interpersonal communication, (11) Involving of voluntary and non governmental organisations in a beg way to promote active community participation in the programme, (12) gearing up of the implementation machinery in the States/UTs and (13) evolving high level inter-sectoral coordination mechanisms at the national State and District levels etc. This draft Action Plan has now been referred to the States/UTs to give them further opportu-